

**TRANSMITTAL LETTER**  
**(General - Patent Pending)**

Docket No.  
PHN16-224A

In Re Application Of: Friedl et al.

MAR 3 1 2003

Serial No.  
09/024,637

Filing Date  
02/17/1998

Examiner  
Dinh, T.

Group Art Unit  
2827

Title: SYNTHETIC RESIN CAPPING LAYER ON A PRINTED CIRCUIT

**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**

Transmitted herewith is: Request for Reconsideration in 5 pages

Notice of Appeal in 1 page  
2 Return Receipt Postcards

in the above identified application.

No additional fee is required.  
 A check in the amount of \_\_\_\_\_ is attached.  
 The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 500999 as described below. A duplicate copy of this sheet is enclosed.  
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 Credit any overpayment.  
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Signature

Dated: March 25, 2003

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I certify that this document and fee is being deposited on 03/25/2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

  
Signature of Person Mailing Correspondence

Wendy E. Thompson

Typed or Printed Name of Person Mailing Correspondence

CC:

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO  
THE BOARD OF PATENT APPEALS AND INTERFERENCES (Large Entity)**

Docket No.  
PHN16-224A

In Re Application Of: Friedl et al.



Serial No. 09/024,637	Filing Date 02/17/1998	Examiner Dinh, T.	Group Art Unit 2827
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Invention: **SYNTHETIC RESIN CAPPING LAYER ON A PRINTED CIRCUIT**

**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**

Applicant(s) hereby appeal(s) to the Board of Patent Appeals and Interferences from the decision of the Primary Examiner dated **January 2, 2003** finally rejecting Claim(s) **8 and 11-14**

The fee for this Notice of Appeal is: **\$320.00**

- A check in the amount of the fee is enclosed.
- The Commissioner has already been authorized to charge fees in this application to a Deposit Account. A duplicate copy of this sheet is enclosed.
- The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. **500999**  
A duplicate copy of this sheet is enclosed.

*Signature*

Dated: **March 25, 2003**

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*Wendy E. Thompson*  
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**Wendy E. Thompson**

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